Combined Declaration and Power of Attorney form for Patent Application Claiming Foreign Application Priority (3/2002)

COMBINED DECLARATION & POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)			Attorney Docket Nu	mber	TID-32348		
			First Named Invento		Wolfgang Ramin		
				COMPLETE IF KNOWN			
	·	_	Application Number		TBD		
Declaration Submitted with Initial Filing		Declaration Submitted after Initia Filing (surcharge (37 CFR 1.16 (e)) required)	Filing Date		Herewith		
			Art Unit		TBD		
			Examiner Name		Not assigned		
As the below named inventor, I hereby declare that:  My residence, mailing address, and citizenship are as stated below next to my name.  I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
Encapsulated Chip and Procedure for its Manufacture							
(Title of the Invention)							
the specification of which							
is attached hereto							
OR							
was filed on (MM/DD/YYYY) as United States Application Number or PTC International							
Application Number		and was amen	nded on (MM/DD/YYYY)		(if applicable).		
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by							
any amendment specifically referred to above.  I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
POWER OF ATTORNEY							
I hereby appoint Practitioners at Customer Number 23494, Texas Instruments Incorporated, as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. I also hereby authorize said practitioners to insert the filing date and/or application number, above, when known.							
FOREIGN APPLICATION PRIORITY CLAIM							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor' or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s)	,	Country	Foreign Filing Date (MM/DD/YYYY)	Priorit Not Clair			
102 35 771.4  Additional foreign applicatio		Germany	08/05/2002				

## **DECLARATION & POWER OF ATTORNEY - Utility or Design Patent Application**

Direct all correspondence Customer Number or Bar Code Label OR Correspondence address below								
Name Texas Instruments Incorporated								
Address Patent Activity								
<sub>City</sub> Dallas		State TX	ZIP 75265					
Country U.S.A.	Telephone (972)	917-5452	<sub>Fax</sub> (972) 917- 4418					
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF FIRST INVENTOR:  A petition has been filed for this unsigned inventor								
Given Name Wolfgang (first and middle [if any])	Family Name RAMIN or Surname							
Inventor's Signature		Date						
Residence: City Freising	State	Country Germany	Citizenship Germany					
Mailing Address Platschkyberg 6a, Freising 85356, Germany								
City Freising	State Germany	ZIP 85356	Germany Country					
NAME OF SECOND INVENTOR:								
Given Name N/A (first and middle [if any])		Family Name or Surname						
Inventor's Signature	Date							
Residence: City	State	Country	Citizenship					
Mailing Address								
City	State	ZIP	Country					
Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.								